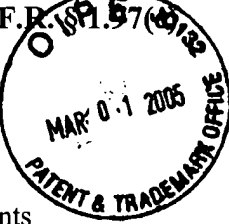


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| INFORMATION DISCLOSURE STATEMENT UNDER 37 C.F.R. 1.57(c)(1)  Address to: Mail Stop Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | Attorney Docket | AERX-080CIP2 |
| | First Named Inventor | RUBSAMEN, REID M. |
| | Application Number | 10/685,746 |
| | Confirmation No. | 6142 |
| | Filing Date | October 14, 2003 |
| | Group Art Unit | 1616 |
| | Examiner Name | |
| | Title: | "METHODS AND COMPOSITIONS FOR TREATING ERECTILE DYSFUNCTION" |

Sir:

Applicants submit herewith patents and/or publications which may be material to the examination of this application and in respect of which there may be a duty to disclose in accordance with 37 C.F.R. § 1.56. While this Statement may be "material" pursuant to 37 C.F.R. § 1.56, it is not intended to constitute an admission that any patent, publication, or other information referred to therein is "prior art" for this invention unless specifically designated as such. A listing of patents and/or publications is shown on enclosed Form PTO-SB/08A and a copy of each patent and/or publication is also enclosed.

Each item of information contained in the Information Disclosure Statement filed herewith was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this Statement (37 C.F.R. 1.97(e)(1)). A copy of the communication is enclosed for the Examiner's convenience.

The Examiner is requested to make the citations listed on the enclosed PTO-SB/08A of record in this application. Applicants would appreciate the Examiner initialing and returning the initialed copy of form PTO-SB/08A, indicating the references have been considered and made of record herein.

No fee is believed due as this statement is being submitted within three months of the mailing date of the enclosed foreign communication. However, if it is determined that fees are required, the Commissioner is hereby authorized to charge any necessary fees associated with this communication or credit any overpayment to Deposit Account No. 50-0815, Order No. AERX-080CIP2.

Respectfully submitted,
 BOZICEVIC, FIELD & FRANCIS LLP

Date: 03/01/05

By: 
 Carol M. LaSalle, Reg. No. 39,740

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PTO/SB/08A (08-00)

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| INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i> | | Application Number | 10/685,746 |
| | | Filing Date | October 14, 2003 |
| | | First Named Inventor | RUBSAMEN, REID M. |
| | | Group Art Unit | 1616 |
| | | Examiner Name | |
| Sheet 1 of 1 | Attorney Docket Number | AERX-080CIP2 | |

| U.S. PATENT DOCUMENTS | | | | | | |
|--------------------------------|-----------------------|-----------------------|--------------------------------------|--|--|---|
| Examiner Initials ¹ | Cite No. ¹ | U.S. Patent Documents | | Name of Patentee or Applicant of Cited Documents | Date of Publication of Cited Document MM-DD-YYYY | Pages, columns, lines, Where Relevant Passages or Relevant Figures Appear |
| | | Number | Kind Code ² (if known) | | | |
| | | 2002/0107182 | | Blood et al. | 08-08-2002 | |
| | | 2003/0119714 | | Naylor et al. | 06-26-2003 | |
| | | | | | | |
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| FOREIGN PATENT DOCUMENTS | | | | | | | | |
|--------------------------------|-----------------------|--------------------------|---------------------|--------------------------------------|--|--|---|----------------|
| Examiner Initials ¹ | Cite No. ¹ | Foreign Patent Documents | | | Name of Patentee or Applicant of Cited Documents | Date of Publication of Cited Document MM-DD-YYYY | Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear | T ⁶ |
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